

Application No.: 10/522888

Docket No.: 13111-00020-US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Stürmer et al.

Application No.: 10/522888

Group Art Unit: N/A

Filed: February 1, 2005

Examiner: Not Yet Assigned

For: METHOD FOR THE PRODUCTION OF (S)-3-
METHYLAMINO-1-(THIEN-2-YL) PROPAN-1-OL

TRANSMITTAL OF COMBINED DECLARATION AND POWER OF ATTORNEY

MS PCT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Applicants hereby submit the executed Combined Declaration And Power Of Attorney in the above-referenced application. A Notification of Missing Requirements has not yet been received.

Please charge our Deposit Account No. 03-2775 in the amount of \$130.00 covering the required fees. The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 03-2775, under Order No. 13111-00020-US.

06/29/2005 MKAYPAGH 00000144 032775 10522888

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Respectfully submitted,

By 

Roberte M. D. Makowski

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Attorney for Applicants

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2005</h3>		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/522888
		Filing Date	February 1, 2005
		First Named Inventor	Rainer Stürmer
		Examiner Name	Not Yet Assigned
		Art Unit	Not Yet Assigned
TOTAL AMOUNT OF PAYMENT (\$) 130.00		Attorney Docket No.	13111-00020-US

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>03-2775</u> Deposit Account Name: <u>Connolly Bove Lodge & Hutz LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
						Small Entity	
Fee Description						Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
_____ - 20 = _____		x _____	= _____		Fee (\$)		Fee Paid (\$)
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
_____ - 3 = _____		x _____	= _____				
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof			Fee (\$)	Fee Paid (\$)	
_____ - 100 = _____	/50	_____ (round up to a whole number) x _____			= _____		
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1051 Surcharge-Late oath or declaration						130.00	

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	55,421
		Telephone	(302) 658-9141
Name (Print/Type)	Robert M. D. Makowski		Date
			June 24, 2005

Application No.: 10/522888

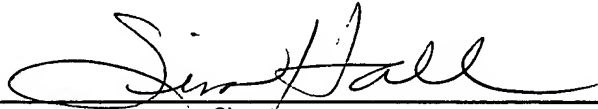
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Certificate of Express Mailing Under 37 CFR 1.10

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on June 24, 2005
Date



Signature

Tina Hall

Typed or printed name of person signing Certificate

Registration Number, if applicable

(302) 658-9141

Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Fee Transmittal (1 page plus 1 copy)

Transmittal Of Combined Declaration And Power Of Attorney (1 page)

Declaration, Power of Attorney and Petition (3 pages)

Postcard

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